



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 2052

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/564,386	01/12/2006	049	2627	NL030851
<b>APPLICANTS</b> Willem Marie Coene, Eindhoven, NETHERLANDS; Johannes Wilhelmus Bergmans, Eindhoven, NETHERLANDS; Albert Hendrik Jan Immink, Eindhoven, NETHERLANDS; Christopher Busch, Eindhoven, NETHERLANDS; Alexander Marc Van Der Lee, Eindhoven, NETHERLANDS; Andries Pieter Hekstra, Eindhoven, NETHERLANDS; Aloysius Michael Spruijt, Eindhoven, NETHERLANDS; Johannes Martinus De Ruijter, Eindhoven, NETHERLANDS;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IB04/51185 07/01/2004				
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 031021439 07/14/2003				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/04/2006				
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/PAUL W HUBER/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 17
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> PHILIPS INTELLECTUAL PROPERTY & STANDARDS P.O. BOX 3001 BRIARCLIFF MANOR, NY 10510 UNITED STATES				
<b>TITLE</b> Method and device for determining write parameters for recording information on an optical record carrier				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	